Leadership – The Key to Creating a Lean Culture at ThedaCare

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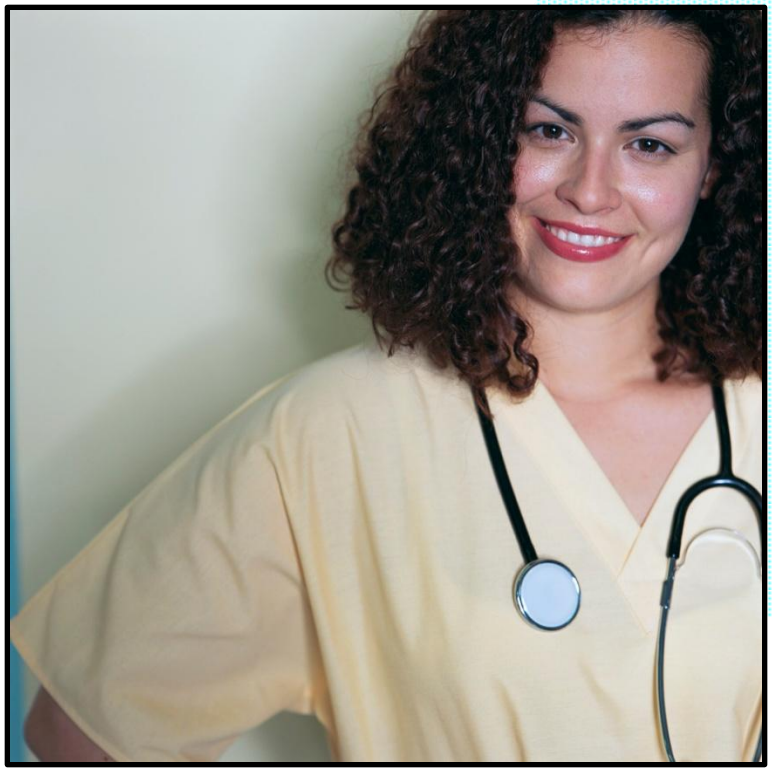

- Graduate from nursing school.
- Start working on a Med/Surg unit.
- Show initiative – noticed by your manager.
- You think you're ready for your next challenging assignment.
- Manager role opens at your hospital – you're encouraged to apply.
- You interview and get the job!

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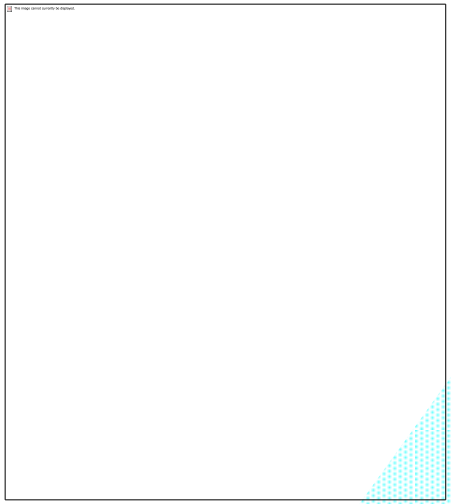

Now what?

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How do I lead?

How do I engage my staff in improving anything?

How do we solve problems?

How is what we're working on connected to our health system strategy?

How is my unit/area performing?

How do we identify problems and prioritize them?

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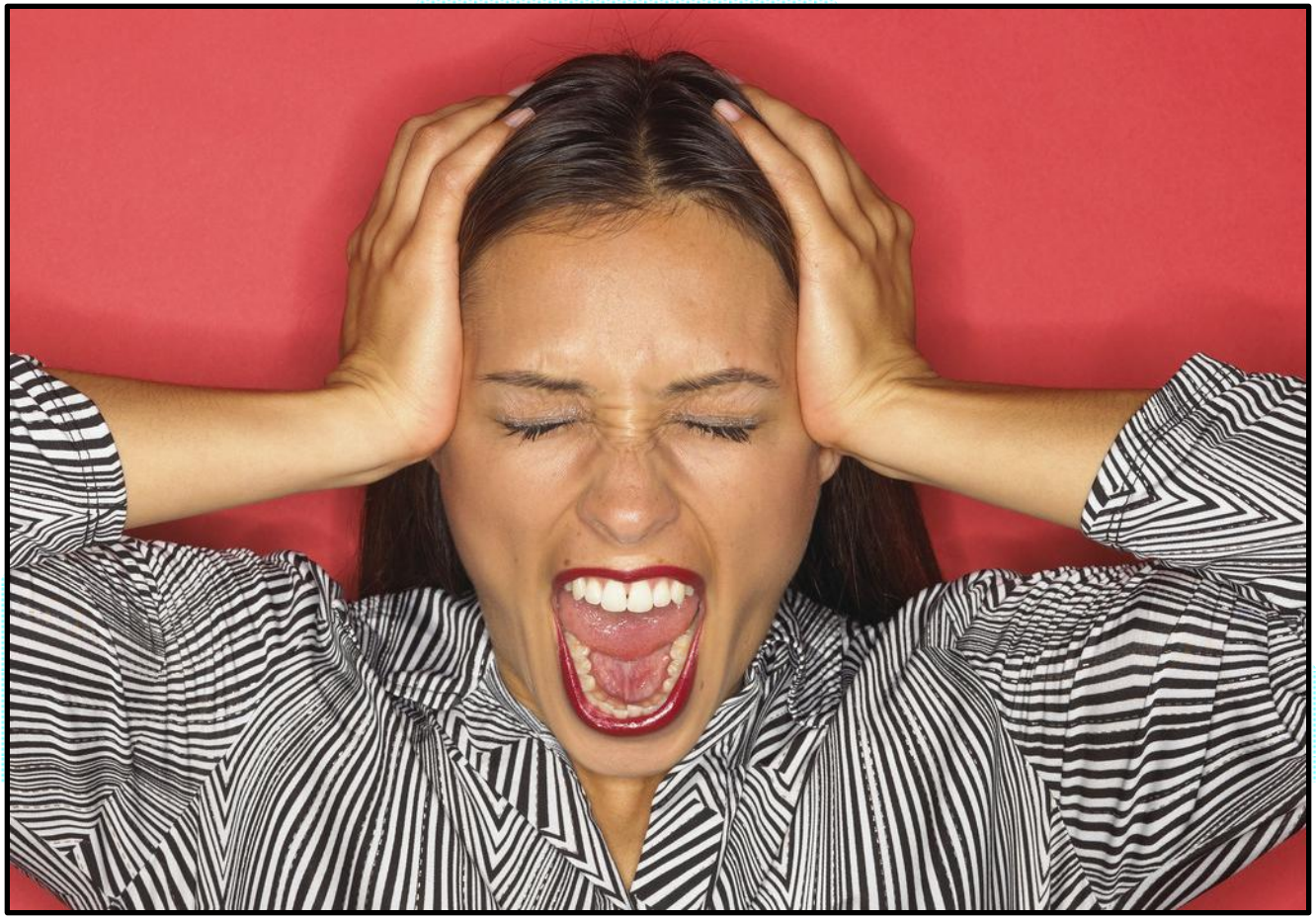
Does this sound familiar?

What was it like for you to be a new manager?



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Typical **managing** techniques

- Spending a lot of time in meetings and my office.
- Avoid going "into the work" too much – don't want to bother people, feeling intrusive, getting in the way, **lacking purpose.**
- Problems – coming at me in multiple ways: email, passing in the hall, department meetings.
- Manager role – problem solver.
- **Little/no connection between problems being worked and overall system strategy.**

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Title: Business Performance System

Revision: 5 **Date: 2-12-09**

Team: BPS Steering Committee:

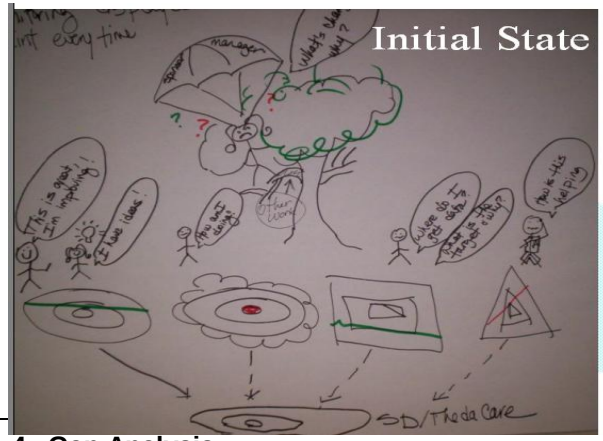
1. Reason for Action:

We are on a continuous improvement cultural transformation, and current systems for managing the business are not in alignment with new expectations.

- Leaders at ThedaCare have their own way to manage their business.
- Leaders do not consistently know their performance.
- There is high variability to how we approach and respond to problems.

Scope: Hospital Division

2. Initial State:



No clear expectation to follow "process"

Don't have consistent process to update Standard Work

Not all Standard Work captured

Hard to see if actions are improving performance

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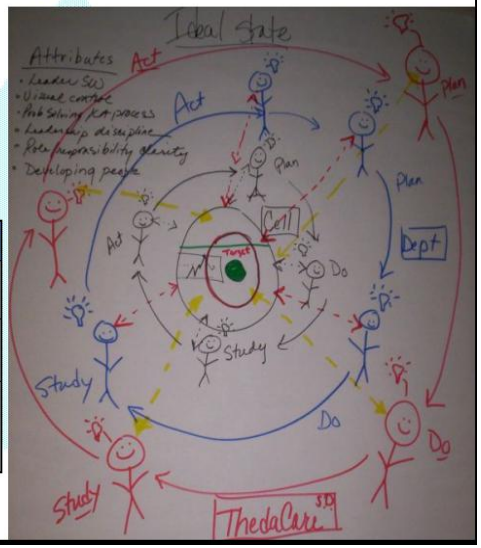
3. Target State:

Creation of a business management system that frees leaders to transform their business while profoundly affecting the lives of our patients thru developing people to solve problems and improve performance

Target State



	Measure	Target
Quality	Accidents	Decrease 50% by 6/2010
Business	Productivity	Increase 8% by 6/2010
Employee Engagement	Number of hospital division leaders using Tier 1-2	Improve by 50% by 2010

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4. Gap Analysis:

Gap Analysis

Problem	Root Cause
We are not consistently performing	Lack of Management System
	Varying perceived need for change
	Data not readily available
	Don't have enough coaches
	Don't see value of Standard work

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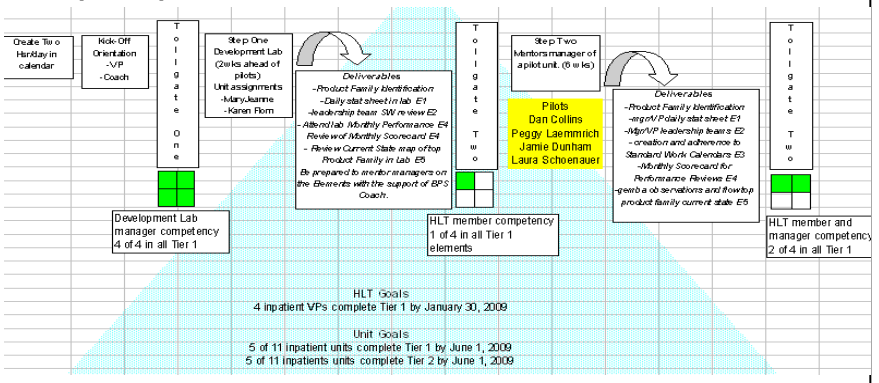
Sponsor: Kathryn Correia
Facilitator: Patsy Engel & Shawn Chartier

Leader: Kim Barnas
Sensei: Jose Bustillo / Brian Preston

5. Solution Approach:

Problem	Root Cause	Countermeasure
We are not consistently performing	Lack of Management System	**If:** We create a Business Management System **Then:** Managers will be able to understand their performance, know the problems affecting their performance, respond timely to problems
		If: We create tiers of progression **Then:** We can developmentally coach through the management system and managers will have clear performance expectations
		If: We create standard work to support each piece of system **Then:** There will be no ambiguity in role expectation
		If: We use Management System to define roles and responsibilities **Then:** We will have consistent management expectations across divisions
		If: Our management System employs the performance criteria from the HDVS **Then:** We will have a balanced approach to leadership development

6. Rapid Experiments:



7. Completion Plans:

What	Who	By When	Complete?
Create case statement for management system	Kim	9/11/08	Yes
Set time frame and agenda for HDVS/ Mgmt System connection	Kim/Roger	Meetings calendared	Yes
Develop Steering committee of 4-5 people	Kim	10/31/08	Yes
What are we calling this piece of the work?	Kim/ Kathryn	11/25/08	BPS complete
Understand dates Brian available for project work and schedule	Patsy	11/25/08	Yes
Schedule weekly Steering Committee Meetings Tier 1 experiment/develop	Patsy	11/25/08	Yes
Present proposed pilots and deployment plan to HLT	Kim	11/19/08	Yes
Create timeline for Pilots	Steering Committee	12/1/08	Yes
Develop curriculum for kick off	Steering Committee	12/1/08	Yes
Develop learning labs and pilot tools/curriculum for lab learning	Steering Committee	12/1/08	Yes
Develop curriculum for kick off and Tier 1	Steering Committee	12/1/08	Yes
Scrub Tier 1 Standard Work	Steering Committee	12/15/08	1st pass complete
Develop Core Team	Kim	12/31/08	Yes
Communicate facilitator role to other facilitators	Steering Committee	12/31/09	Yes
Meet with Support Groups (DR, Quality, Finance, TIS) to give overview of pilots and to gain consensus on support	Steering Committee	1/5/09	Yes
Complete VP Pilot Orientation	Steering Committee	1/16/09	
Complete VP/Manager Pilot	Team	2/26/09	

8. Confirmed State:

Implementation Targets	Measure	Initial	Target	Achieved Date
	Developmental Labs through Tier One		1/5/09	1/5/09
	2 Week VP Orientation Complete		1/16/09	1/16/09
	6 week Manager/VP Tier one Pilot Complete		2/26/09	2/26/09
Outcome Metrics				
Quality	50% Decrease in Accidents		6/2010	
Business	8% Increase in Productivity		6/2010	
Engagement	50% Increase in Managers Using Tier 1 and 2 Elements		6/2010	

9. Insights:

What went well?	What did not go well?
8-10 No Meeting Zone	Traveling between AMC and TC
We really did create new habits… Daily Stat Sheet, etc.	The more we see, the more we want to fix it all.
These elements did help us see the business.	Waiting to problem solve is difficult, but we see why we must wait.

Actions

Reduce Travel in Tier 2 by 60%
Tier 2 pilot will be problem solving!
Integrating HDVS and TIS VS with BPS
A3 in developing Tier 2 Standard Work

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Reason for Action

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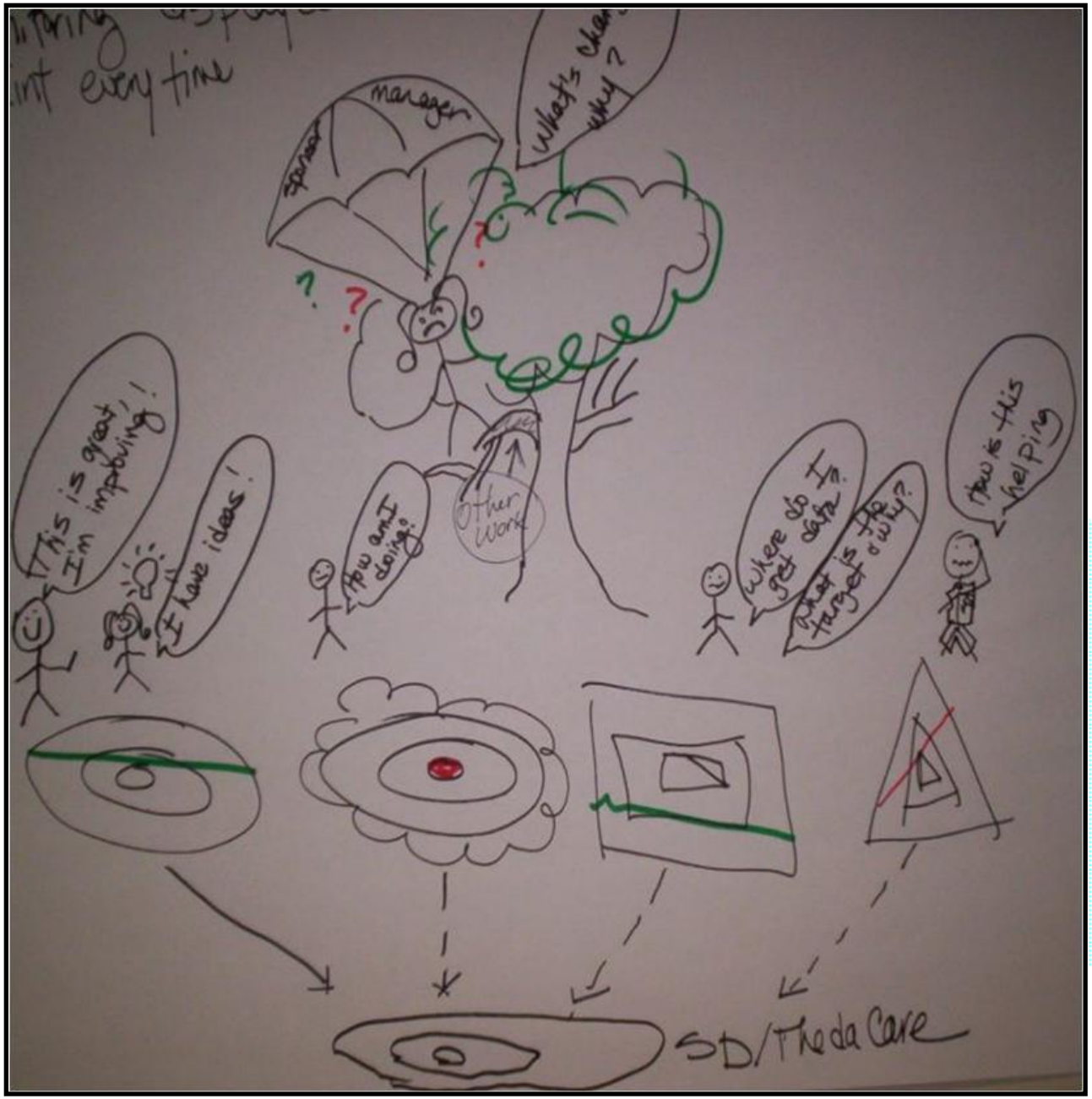

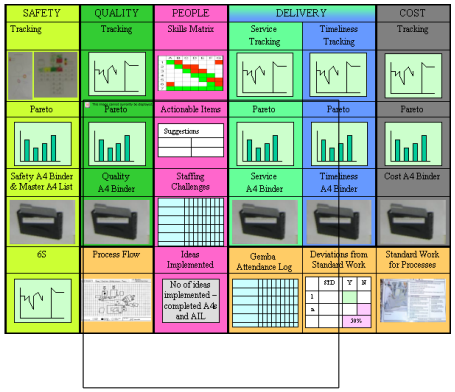

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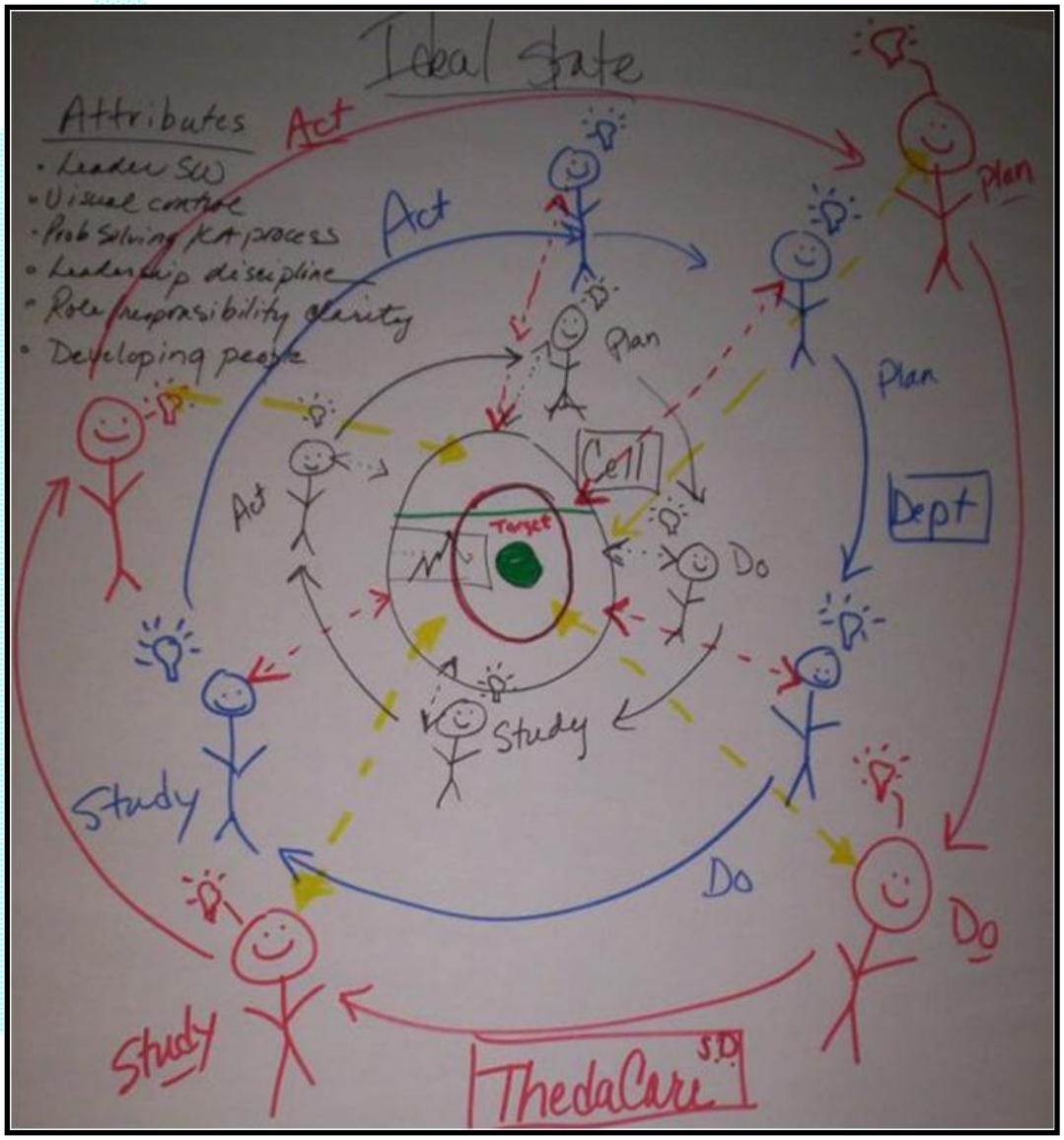

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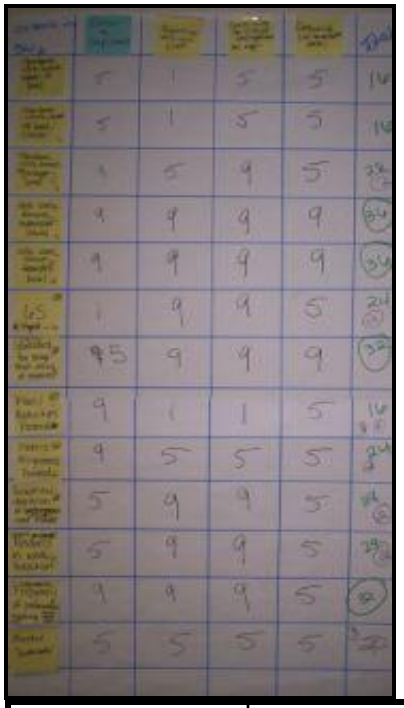
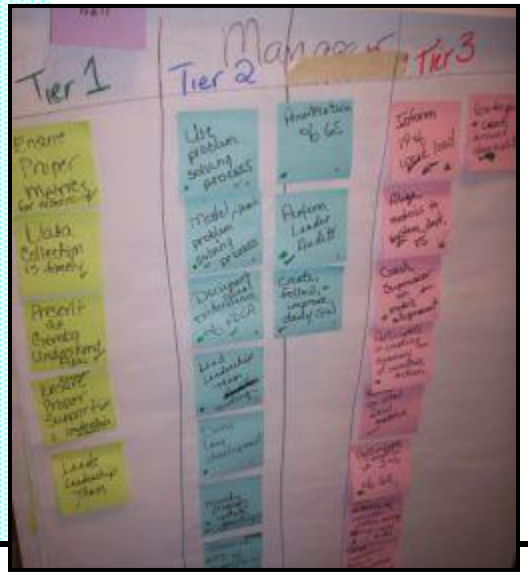
Solution Approach





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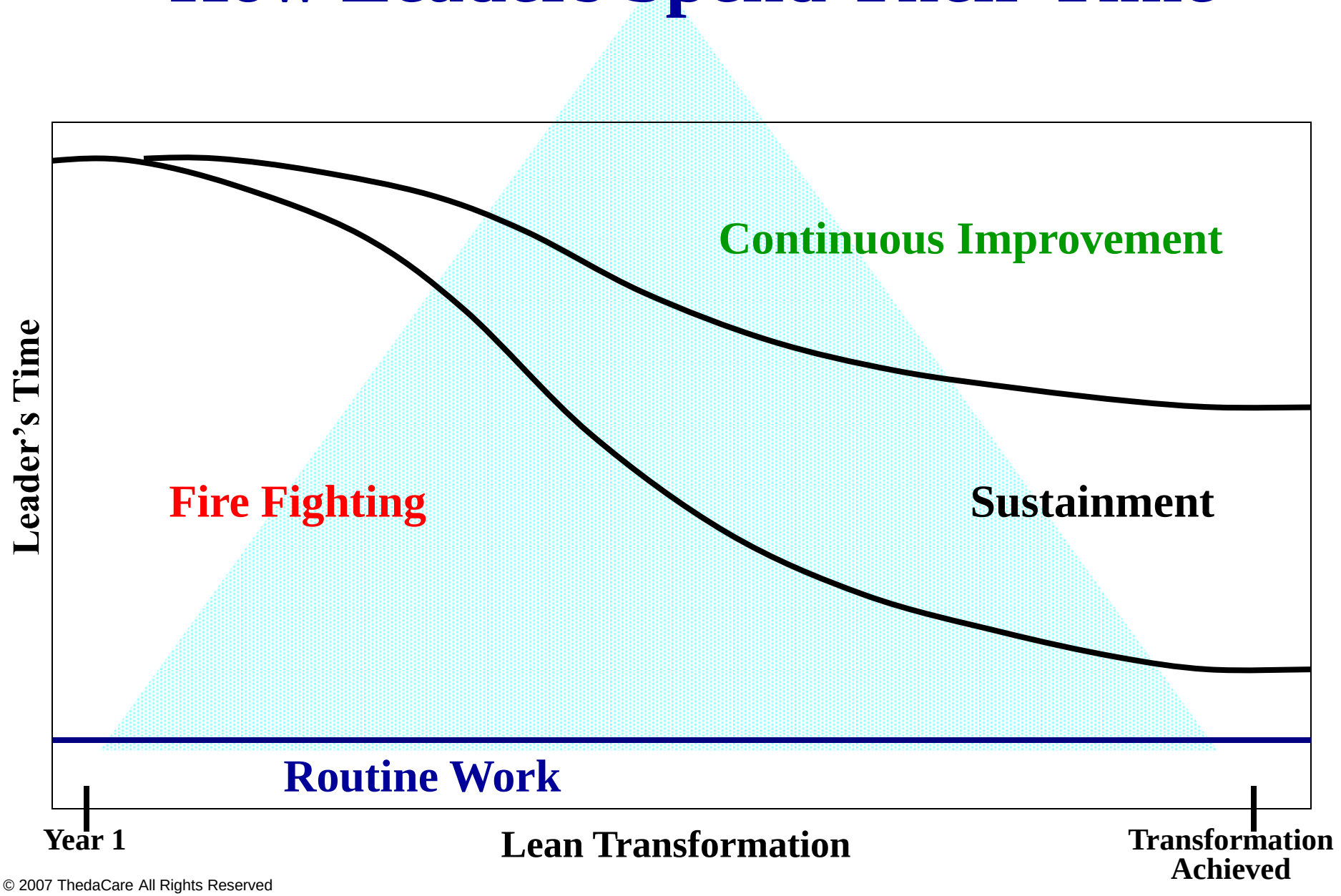
How Leaders Spend Their Time



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"Culture is an idea arising from experience. That is, our idea of the culture of a place or organization is a result of what we experience there. In this way, a company's culture is a result of its management system…culture is critical, and to change it, you have to change your management system."

Creating a Lean Culture by David Mann

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Experiment: Leader Standard Work

- Daily Stat Sheet.
- Daily Performance Review Huddle.
- Leadership Team and Scorecard.
- PDSA.
- Monthly Scorecard Review Meeting.
- Process Observation Calendaring (kamishibai)

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Would a tool that could help you to do the following interest you?

Learn and understand your business

Proactively plan for your day

Gain insights for future problem solving

Recognize/understand developmental and coaching needs of staff around problem solving

Develop your leaders

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Template

- Monday through Friday
- Divided into 5 categories
  - ✓Safety
  - ✓Quality
  - ✓People
  - ✓Customer Satisfaction/Access
  - ✓Financial Stewardship
- Customize questions to manager/unit
- Red questions on template are required questions in some form

Daily Stat Sheet

Red=Requried Questions(in some form)

Rev6 6/20/2010

Unit Name

	Date	Mon	Tues	Wed	Thurs	Fri	Notes
Safety	What are the known or anticipated safety risks for patients/staff/family (think about potential staff injuries)						Monday
	Falls# High Risk						
	Employee Injuries						
	Medication (delays, defects)						

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Daily Stat Sheet Manager to VP

Manager 3S Inpatient Oncology
Daily Measures
Safety
How many patients or staff are at risk?
infections
interpreter concerns
employee injuries
Quality
Any quality opportunities or concerns?
falls, bundles, med. Rec/errors
Any patient complaints/Follow ups?
Any equipment or room concerns?
People
Any staff with special concerns or barriers?
Who needs the most support how can we help them?
Any physician or leadership concerns?
Any thing, staff or provider to recognize or celebrate today?
How are you planning on covering lunches and breaks?
Any care management concerns?
Delivery (Service and Timeliness)

VP Daily/Weekly Stat Sheet Kim B.	Department: Inpt Oncolog	
Dates	Monday	Tuesday
Daily Measures		
Safety		
How many Patients/Families or staff are at Risk?		
Quality		
Any Quality Opportunities or concerns? Falls, bundles, med rec/errors		
Patient complaints/Follow Ups		
People :		
Any Staff with Problems/Barriers?		
Who needs the most support today (weakest link)		
Any Physician or Leadership issues?		
Any thing, staff or provider to recognize or celebrate today?		
Delivery		
Any areas that Demand exceeeds Capacity		
For Oncology- Any non- oncology pts on the floor ?		
How many filled beds ?	16 beds	16 beds
ow is care management helping to progress care today		
How many discharges planned today?		

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Monthly Scorecard Manager to VP

Owner Peggy Laemmrich		Manager Monthly Scorecard		
		These metrics were last updated on: 5/6/09		
Drivers: The Performance we must respond to and focus daily improvements on.				
Measures	Source SD, Hosp watch or Hosp Initiative	Goals	YTD Status	Owner
Safety	HI	Reduce Fall Rate (falls/1,000 patient days) by 20% for 2009		Karen
Quality	SD	Hold for Medication Administration Metric		Michelle VB
People		Reduce Clinical Staff Turnover percentage		Peggy
People	HI	# of clinical staff competent/ total number of staff		Michelle M
Cost	HI	Total Clinical Labor Costs / Unit of Service		Jill

Owner: Kim Barnas		VP Monthly Scorecard		
Hospital Division Drivers: The Performance we must respond to and focus daily improvements on to move the System True North Metrics. Key: SD/Strategy Deployment HD/Hospital Driver HW/Hospital Watch				
Measure of	Source SD, HD, HW	Hospital Drivers	YTD Status (Fill in Red/Green Only No Numbers)	Sponsor/Owner
Safety	SD	Increase the % of Patients with INR in the safe range		Wilson/ Berry
Safety	HD	Reduce Patient Falls (in Acute care areas) by 20% - per 1000 patient Days		Barnas/Adair
Quality	SD	% First Pass Yield for Medications available to be given		Decker/Malkowski
People	SD	Reduce OSHA incident rate of sprains and strains in the hospital by 50%		Gautney/Collins
Cost	HD	Increase Operating Margin at Theda Clark to x%		Ross
Cost	SD	Increase Operating Margin at Appleton Medical Center to x%		Ross
Cost	HD	Achieve Budgeted Total Clinical Labor Cost per Unit of Service		Casewirth/E. Olson

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Monthly Scorecard Review Meeting

- Review Division/System Performance.
- Review Drivers (Key Metrics that problem-solving is occurring around) – challenge each other.
- Review Watch Indicators – make recommendations whether to move any watch indicator to driver status.
- Action Plan.

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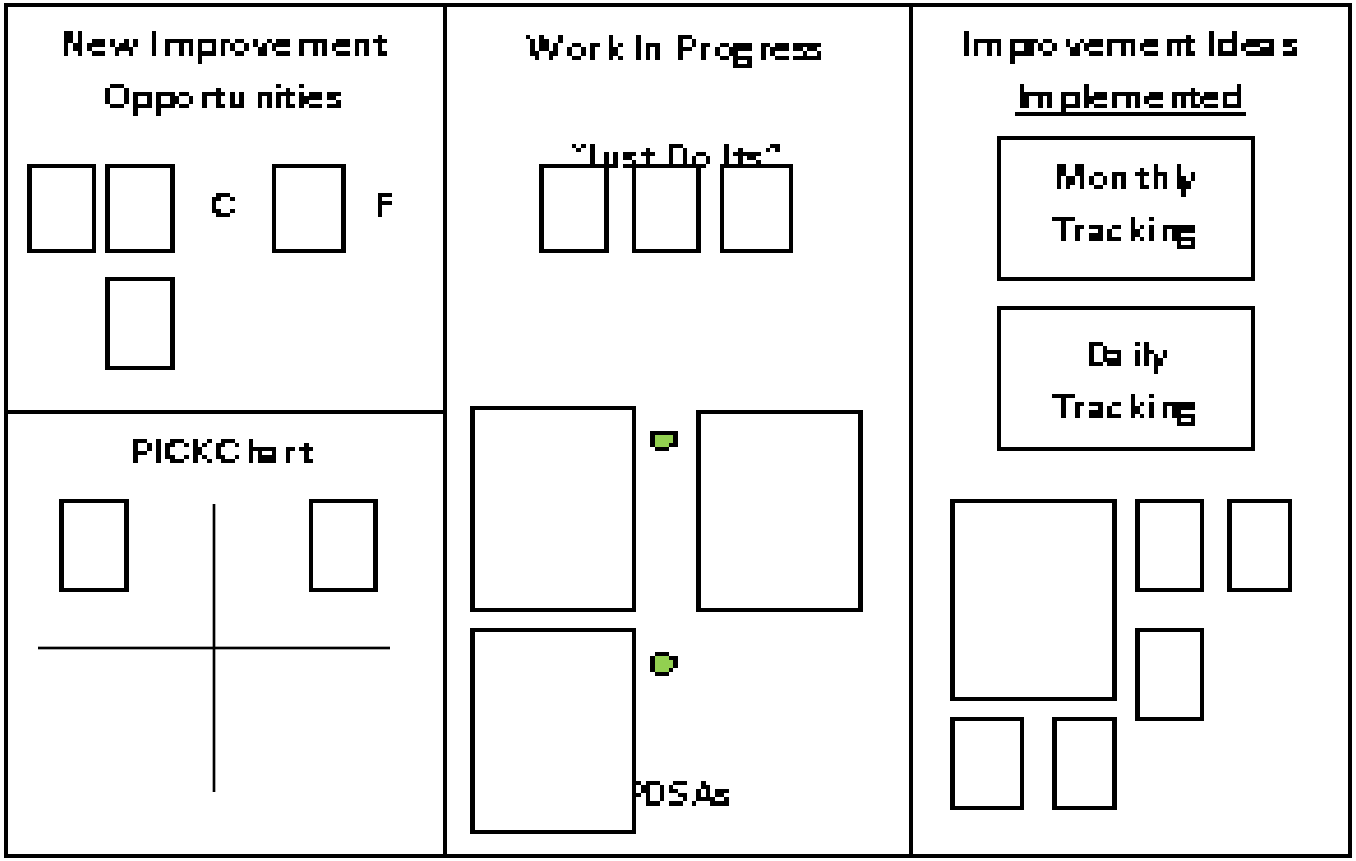
Daily Performance Huddles



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Leadership Standard Work

- Lead (80% of their work through SW)
- Supervisor (50% of work SW)
- Manager (25% of work SW)

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Lead Standard Work

7A-7P 8 ECP Lead Standard Work

Last Updated	7/5/2011	Owner	Leah Gassner	Performed By	Lead RN	Work In Process	1
		Revised By	Shana Herzfeldt	Rev. Number	24		
Takt Time	12 hours	Trigger	New Shift begins	Done	Lead report to next shift		

Leader Standard Work

DATE: _____

INITIALS: _____

- Start new Standard Work sheet for each shift
- Document item completed in ☐ column
- Record comments for not completing during scheduled time and other defects noted
- Store in Completed Lead Standard Work outside Supervisor office
- Clinical Leads split the 4 nursing teams so there is a focused effort on the two teams to coach and mentor

GOAL: 1) All Clinical Leads to perform consistently so staff know what to expect
2) Learning to see
3) Attempt to be proactive versus reactive
4) Support staff

Time	Major Steps	Details	✔☐	Comments
0700-0710	Prep for review of stat sheet/plan for progression	-Review clinical lead outlook note to be prepare with questions for stat sheet -Supervisor and Noc clinical lead will discuss falls, employee injuries, acknowledgements of staff and review MESH while review of patients and note is happening		
0710-0720	Report overview with supervisor/ manager to discuss stat sheet	-Discuss stat sheet with both the night resource/lead and day clinical lead and resource -Discuss any safety, quality, people, delivery and cost issues (ie: any incident reports, falls, medication delays, safety risks, bundle tracking etc.) along with Production Control Board -Know MESH projected HPPS variance for discussion _____		
0720-0725	Listen to phone updates	Break room		
0725-0735	Defect/Review Huddle	-Gather in break room after report -If discussing tracking center, leader of the defect huddle will bring group there to discuss		
0735-0800	Prioritize how you will help remove barriers	-Review discussion points from stat sheet -Discuss with both leads the sequence of provider flow (decide based on dc, critical pt needs who would be best to have providers see first if they don't have a preference) -Decide if the barriers that are present are "just do its" or learning opportunities for staff and how you will mentor		

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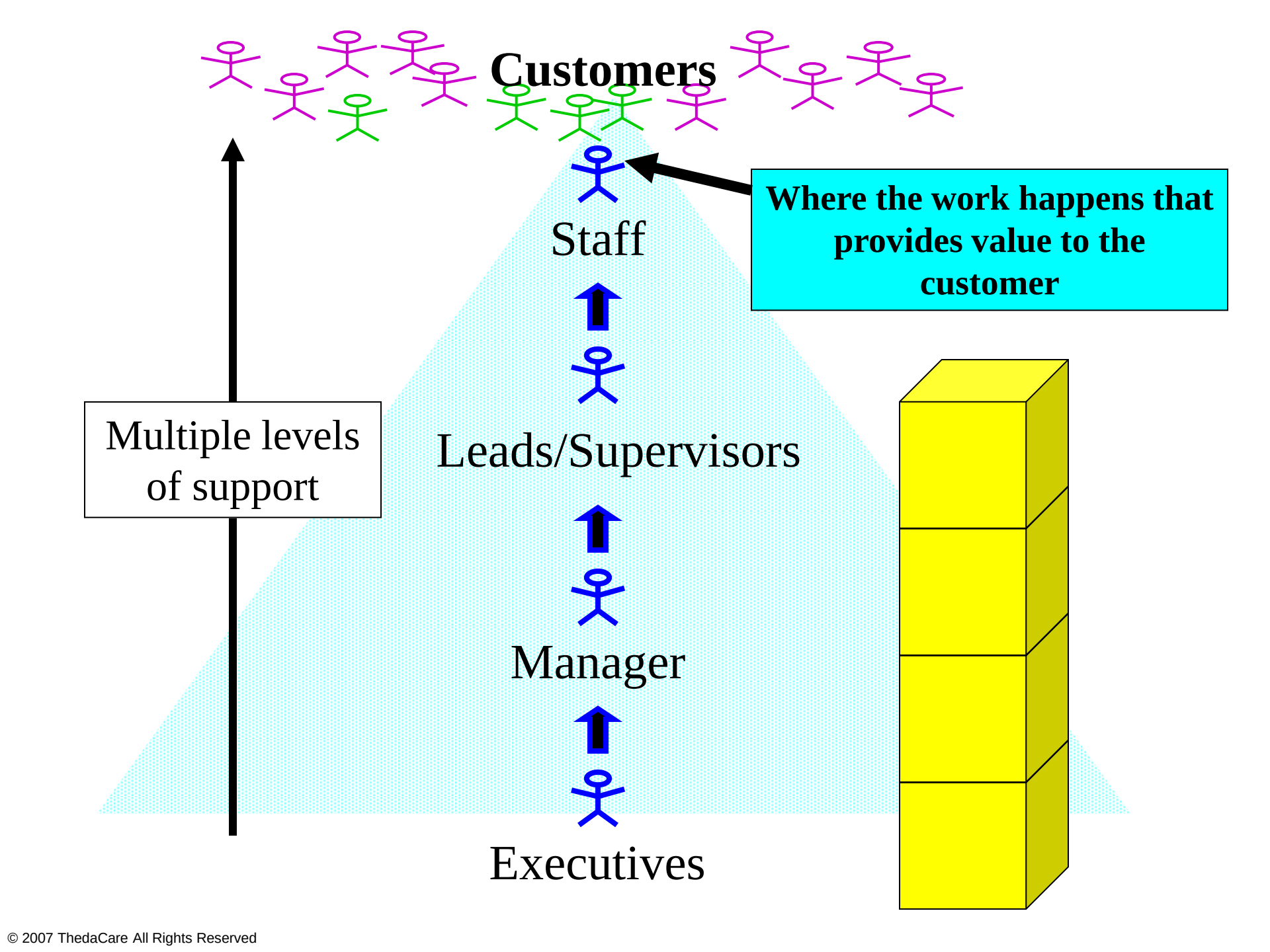

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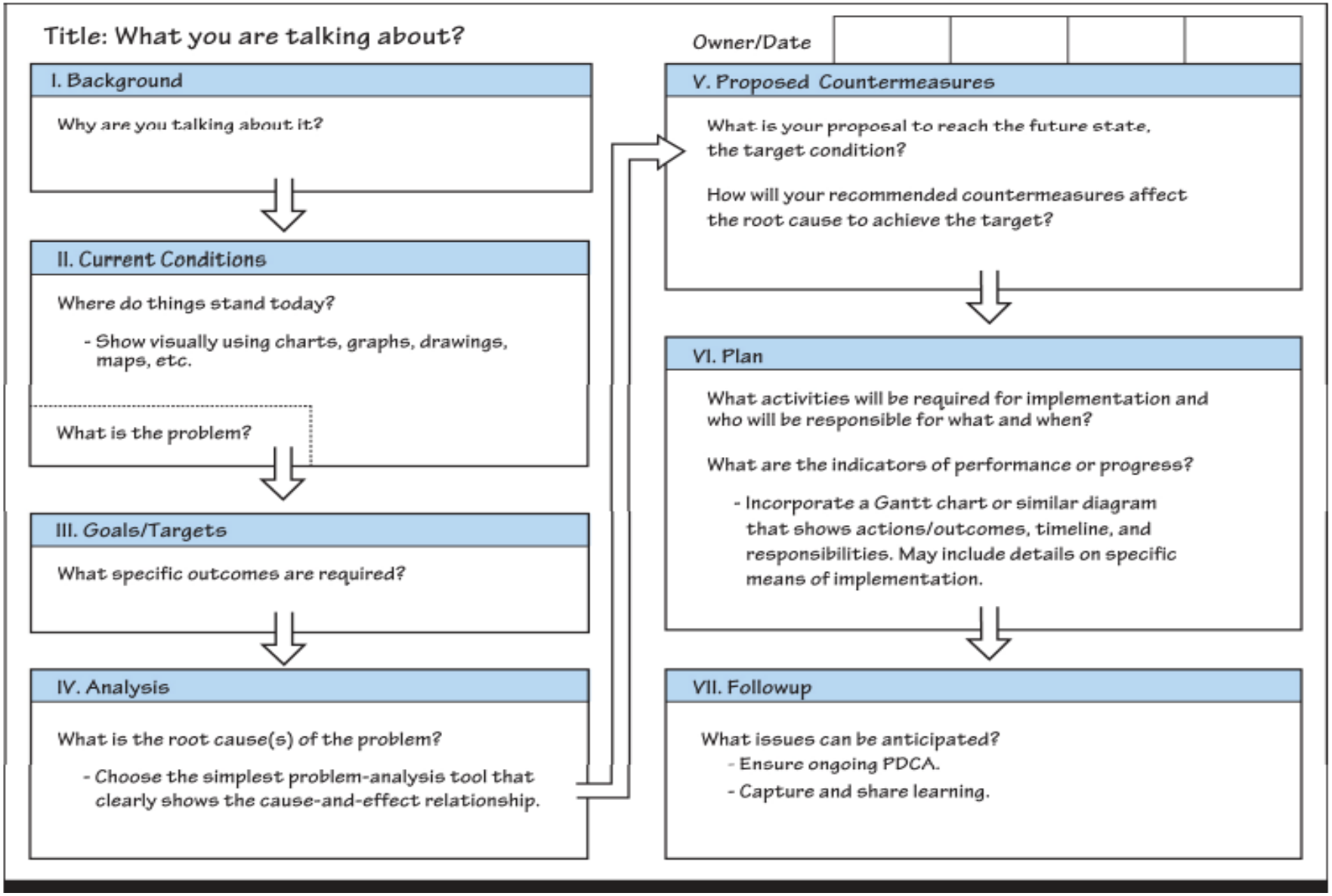
PDSA – A3 Thinking



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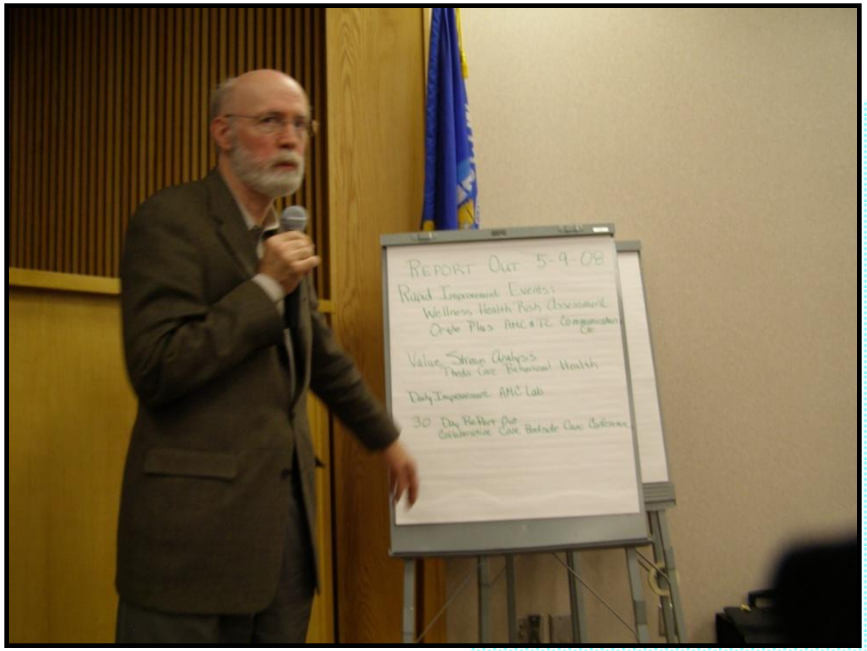

Jim Womack – Lean Enterprise Institute: ThedaCare visit 5/9/08

"All processes have a desperate desire to head toward chaos, to get worse fast, and the only thing standing in the way is management. Who is responsible for this process with their team?"

Process Observation Calendaring

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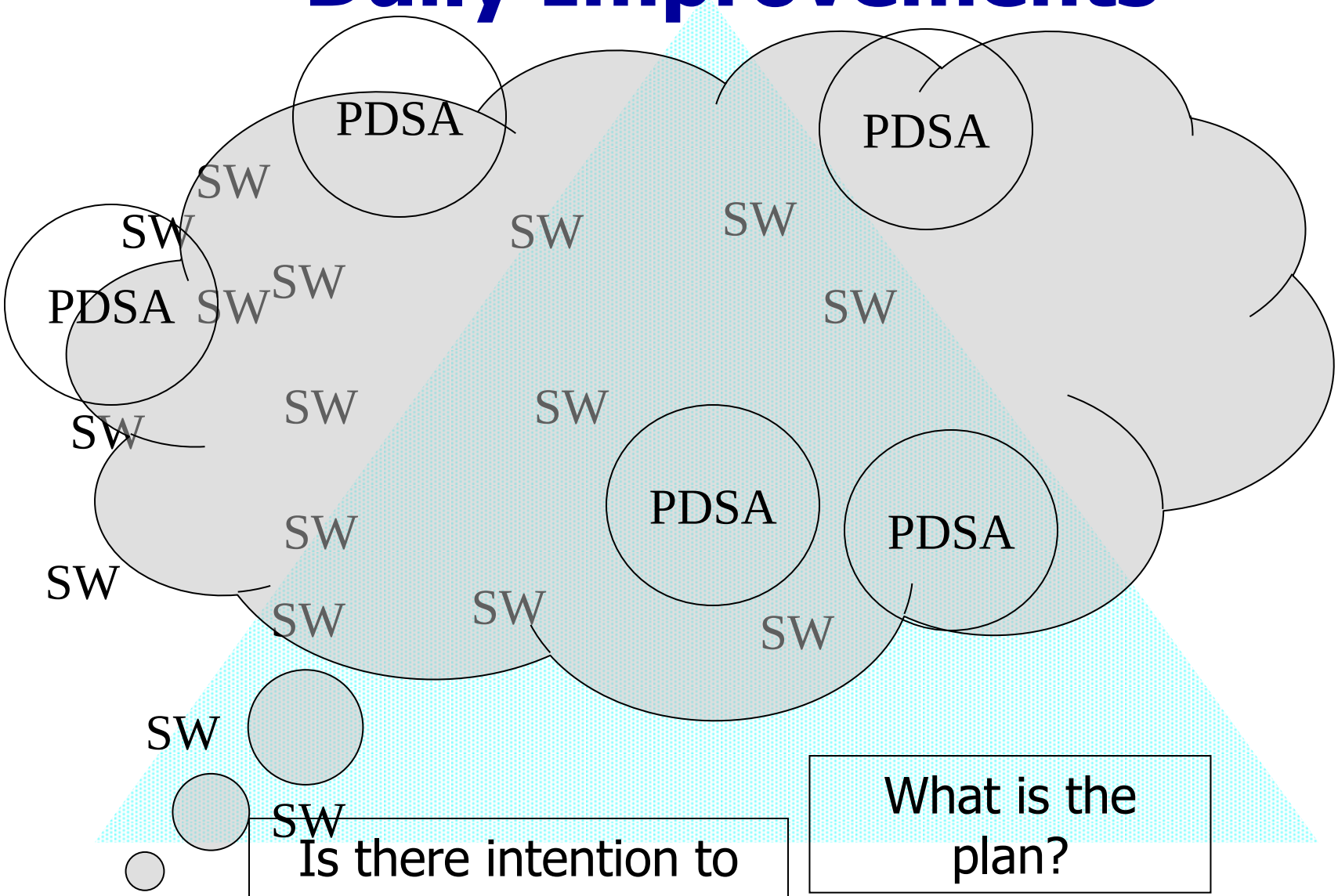
Daily Improvements



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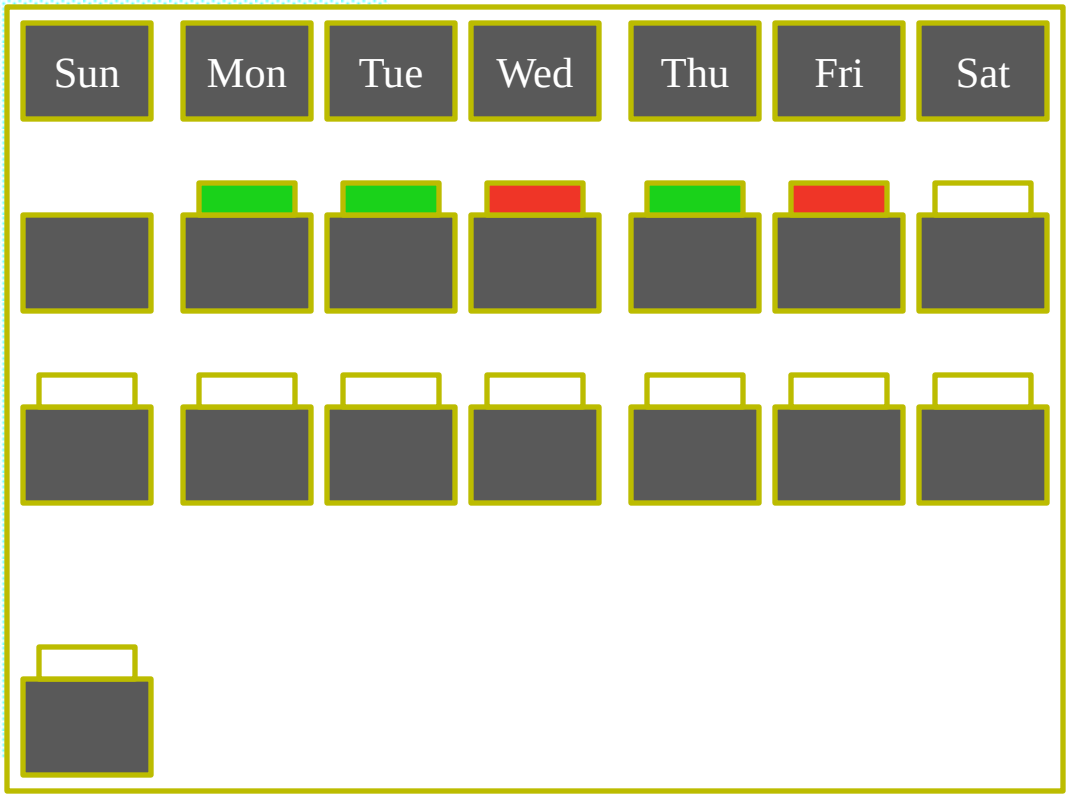
Process Observation Calendaring

Process Observation Pareto

Processes	November	December	January	February	March	April	May	June	July	August	September	October	November	December
Example Process														
White Board														
PCB Problem Solving Tool (tollgates/delays)														
I&O														
Pain Management														
Environmental Safety														
Safe Patient Handling														
Care Plan Notes														
Purposeful Rounding														
Fall Bundle														



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Key Questions

- Is there Standard Work?
- Is the standard work being followed?
- Were people trained to standard work?
- Is the current standard the best known way?

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Standard Work

- Teaching
- Observing
- Coaching
- Identifying Improvement Opportunities

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Results?

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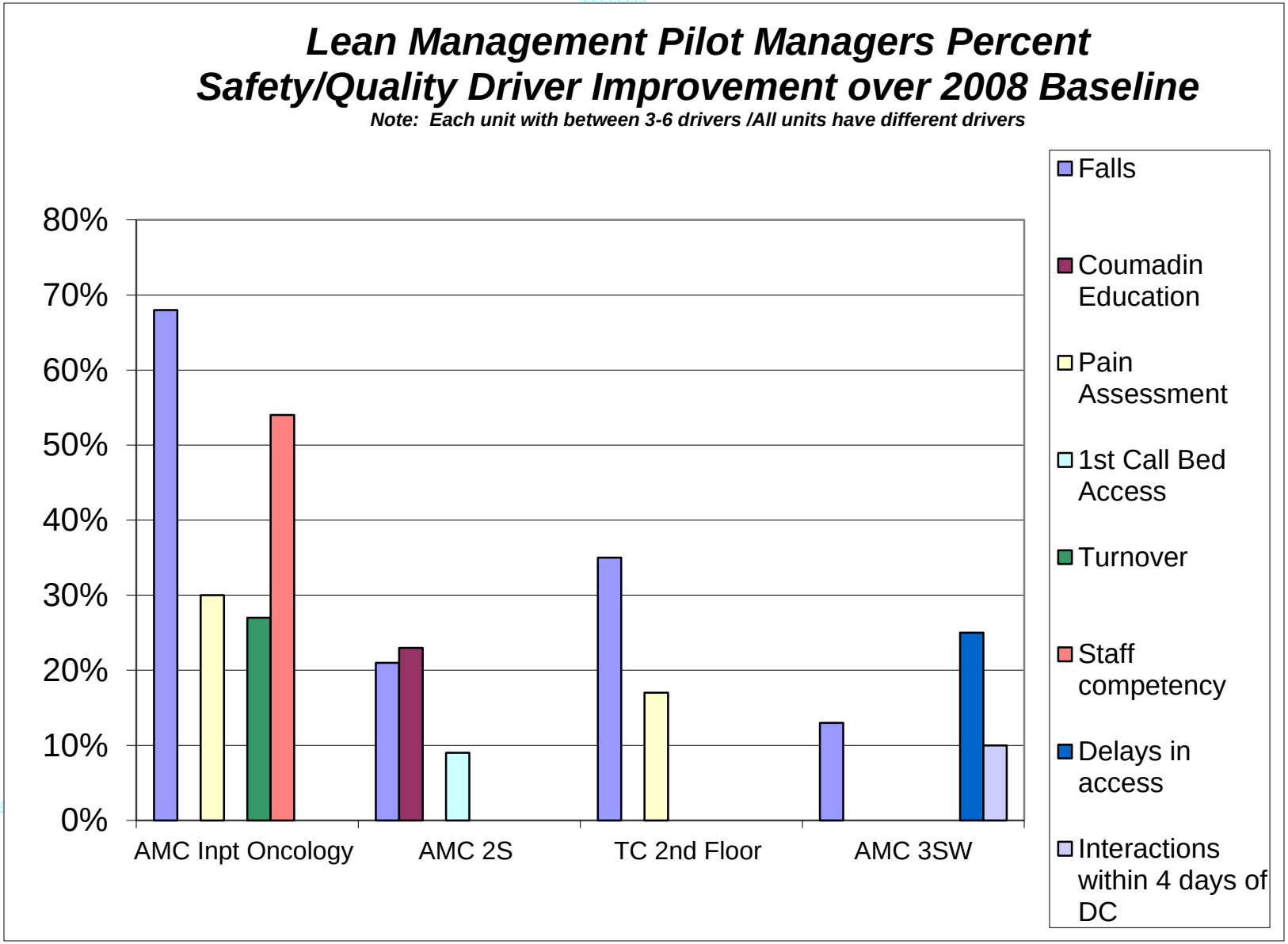
Safety/Quality



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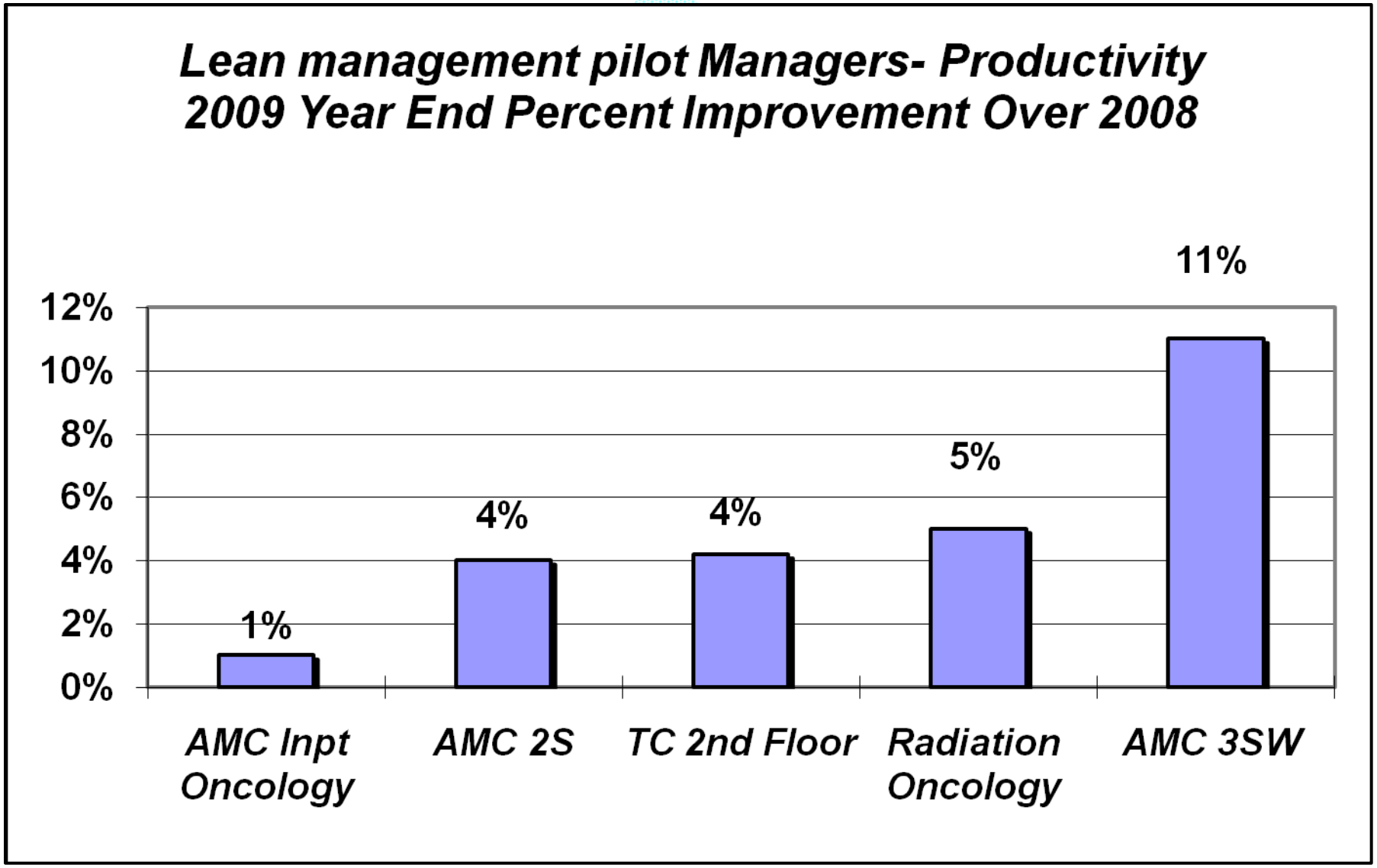
Productivity-Clinical Labor Costs/UOS



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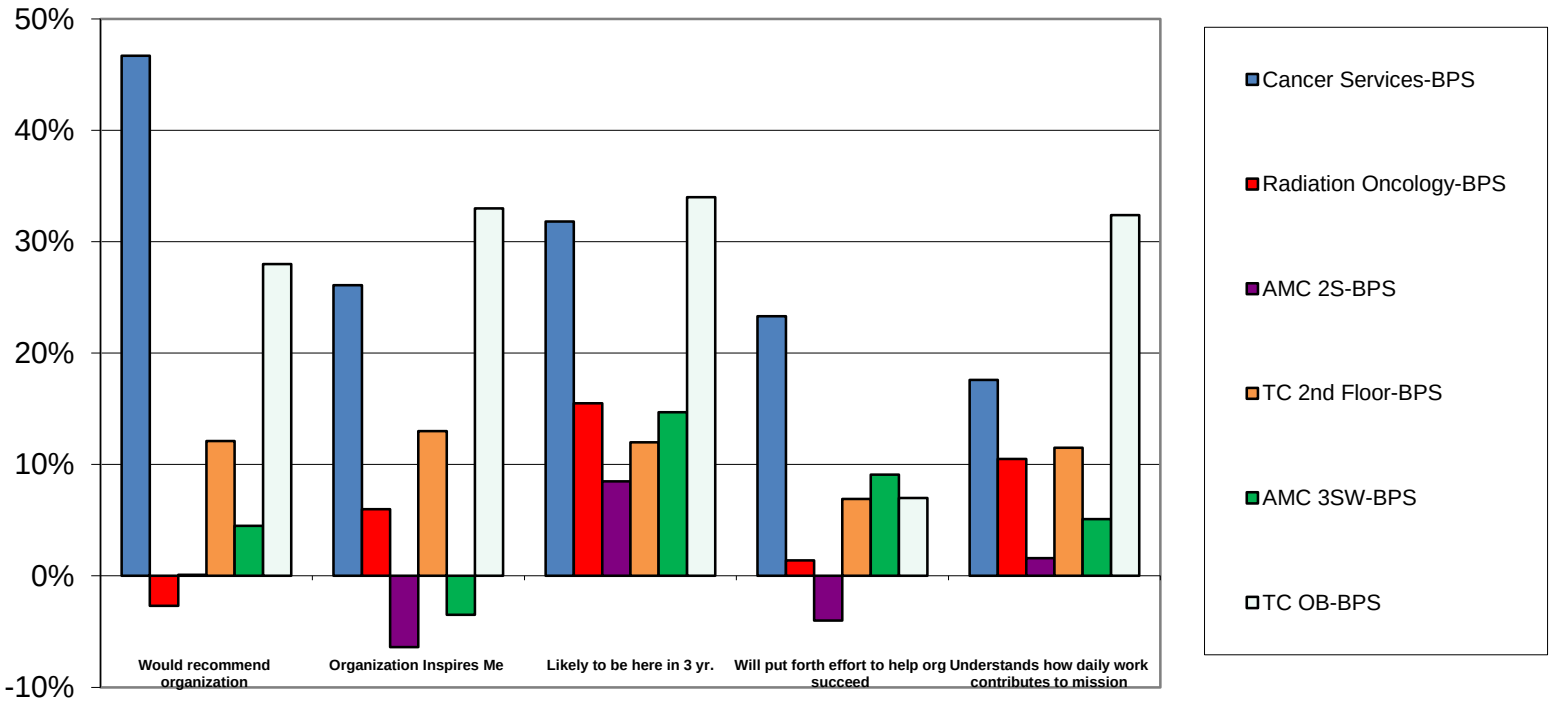
Employee Engagement

2009 Employee Opinion Survey Percent Improvement
Lean Management Pilot Units
2008 vs 2009



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- **Connection from System Strategy to problems being solved in the work.**
- **Managers/Supervisors/Leads coaching through problem-solving.**
- **System of accountability.**
- **Purpose for managers in the work.**
- **Standard work implemented with the intention by leadership to observe and coach to the standard.**

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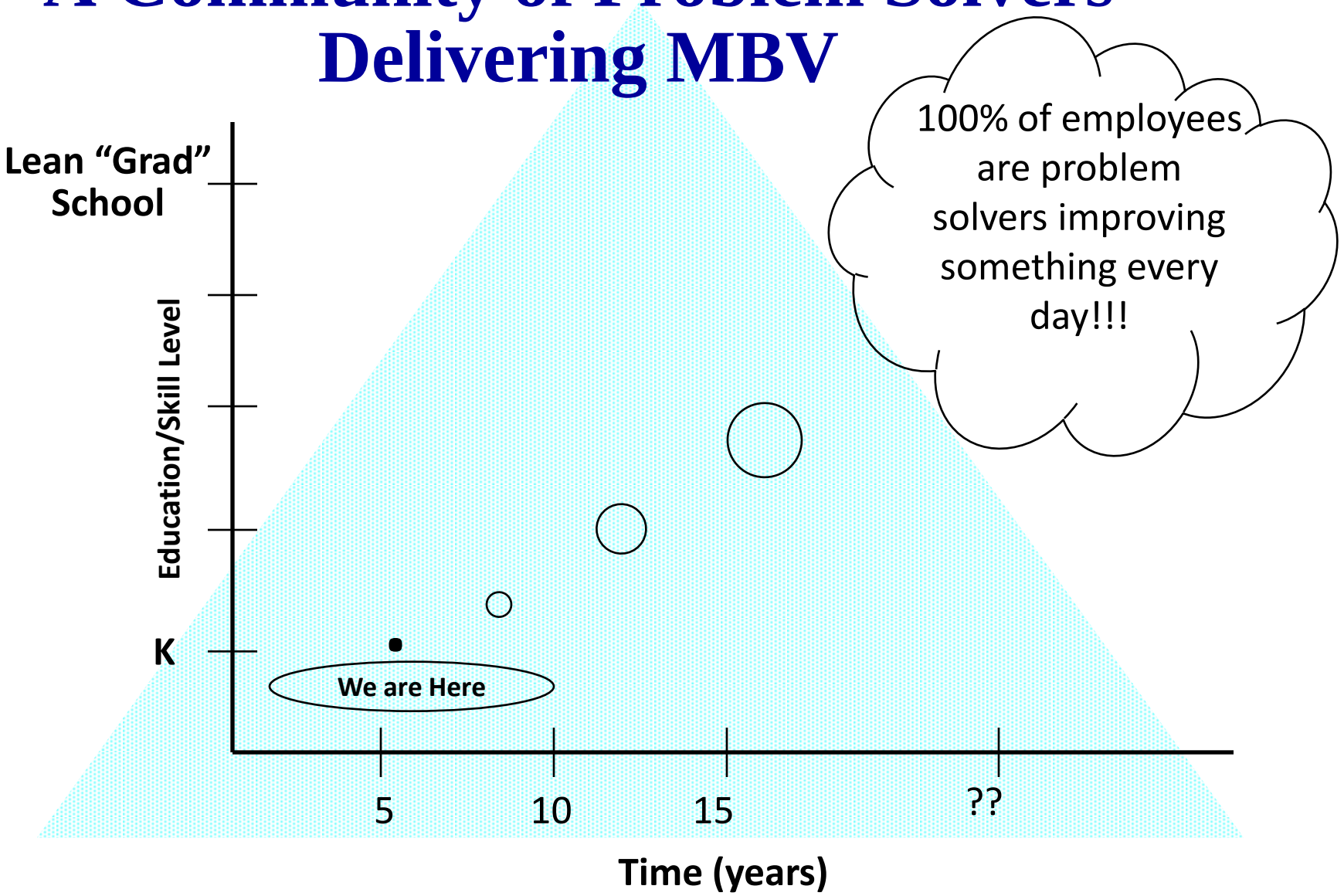
A Community of Problem Solvers Delivering MBV



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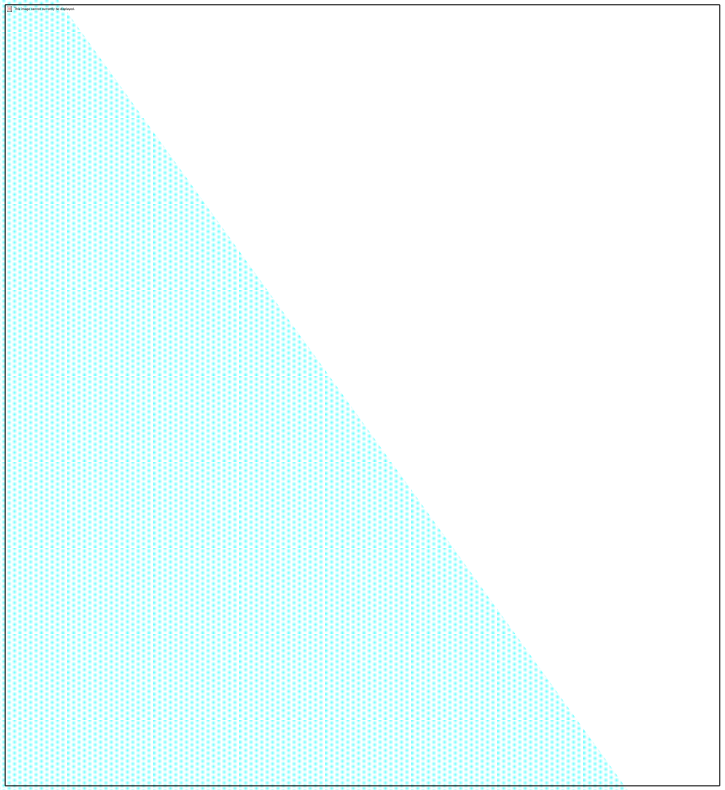
Lessons Learned

Following standard work is hard – especially for leaders!

Who is observing and coaching leaders to follow and improve on their own standards?



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Questions?

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Resources

Lean Enterprise Institute:
www.lean.org

ThedaCare Center for Healthcare Value:
www.createhealthcarevalue.com

Healthcare Value Network:
www.healthcarevalueleaders.com

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